



MORRISTOWN COLONIALS
MORRIS RUGBY YOUTH PROGRAM

**MORRISTOWN COLONIALS RUGBY YOUTH FLAG PROGRAM
SUMMER 2011**

A registration form is required for each player by May 31st.

Child's First Name: _____ Last Name: _____

Street Address: _____ Fall 2011 Grade ___ Age ___ M ___ F ___

City, Zip Code: _____ DOB _____

Parent/Guardian Names _____

Home Phone # _____ Parent Cell # _____

In case of practice cancellation, to advise of schedule changes, and to provide general program information, please provide the following information:

Please provide a legible E-Mail address. E-Mail is the Colonials primary method of communications.

Primary E-mail address: _____

Secondary E-mail address: _____

Secondary Cell #: _____

Player cell phone #: _____

MEDICAL INFORMATION

Please indicate if you child has difficulty with any of the symptoms below:

Heart Problems _____ Shortness of Breath _____ Asthma _____

Diabetes _____ Kidney Problems _____ Vision Problems _____

Glasses, Contacts _____ Chest Pains _____ Hearing Impaired _____

Concussions _____ Seizures _____ Headaches _____ Allergies _____

Bone, Joint, Skull, Fracture _____ Past Operations _____

Other: _____

Does your child take medication regularly or in certain emergencies? _____

If yes, please provide the coach written instructions.

Player Fee: \$55.00 per player, \$50.00 per sibling _____
 Player Uniforms: Rugby Jersey \$30.00 _____
 American Flag Shorts w/Flags \$15.00 _____
 Late Fee: after May 31th \$10.00 _____

Become a Morris Rugby Member: Annual Gen. Membership \$35.00 _____

With your paid Annual Membership you receive:

a Morris Rugby crested patch

a preferred customer # to receive a 10-15% disc. on the Canterbury of NZ website

special promotions from our Canterbury vendor on rugby wear and equipment

and a 1 yr, Half Priced subscription to Rugby Magazine \$15.00 _____

Annual membership is not required to participate in our Youth Programs. We do ask that each family consider supporting our parent organization. Morris Rugby, Inc is a 501c3 non-profit that oversees 20 area youth and adult rugby programs. Thank you for your support.

Checks are payable to Morris Rugby, Inc. Total Enclosed _____

How can I help the Colonials?

Assistant Coach ___ Field Crew ___ Photographer ___ Equipment ___ Home Game Helper ___

Can you be a T-Shirt sponsor (or find us one) for \$150.00? If so, please contact us, see below.

Parental Consent:

I, the parent or guardian of the player named above, do hereby give my permission in my absence for any necessary emergency treatment to be administered by those licensed to do so. I also give my approval for his/her participation in all Morris Rugby Corp. activities and assume all such risks and hazards. I hereby grant Morris Rugby Corp., or its assignees, permission to use my child's image for education, promotional, fundraising and general public relations purposes.

Parent/Guardian

Signature _____ **Relationship** _____ **Date** _____

Please make checks payable to Morris Rugby, Inc.

Mail this registration form along with payment to:

Carol Pruett, 10 Jardine Ct., Morris Plains, NJ 07950.

For questions on this form, or sponsorship, please e-mail to cckb@optonline.net

For more information about Morristown Colonials Youth Rugby go to:

www.morristownrugby.com